Under the Bo	nonverk Reduction Act of	1995, no norcen are r	auired to	U.S. Pater	nt and Tradema	ed for use through (ark Office; U.S. DEF	06/30/2010. C ARTMENT O	F COMMERCE	
				respond to a collection of information unless it displays a valid OMB control number Complete if Known					
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 481)			R. 4818).			0/531,889-Conf. #5900			
FEE TRANSMITTAL				Filing Date		June 5, 2006			
For FY 2009				First Named Inventor		Achim Feurer			
FOF F 1 2009				Examiner Name J.		Murray			
Applicant claims small entity status. See 37 CFR 1.			,	Art Unit 16		624			
TOTAL AMOUNT OF PAYMENT		(\$) 940.00		Attorney Docket No.		69040(303989)			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
x Charge any additional fee(s) or underpayments of x Credit any overpayments									
FEE CALCULATION									
	G, SEARCH, AND E	XAMINATION FEE	ES .	 					
FILING FEES SEARCH FEES EXAMINATION									
Application Ty	/pe Fee (\$	Small Entity) Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	330	165	540	270	220	110	10031	aid juj	
Design	220	110	100	50	140	70	***************************************		
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES Small Entit									
Fee Description Fee (\$)									
Each claim over 20 (including Reissues)							52	26	
Each independent claim over 3 (including Reissues) 220 110									
Multiple dependent claims							390	195	
Total Claims - 20 or HP			Fee Paid (\$)			Multiple Dependent Claims			
HP = highest number of total claims paid for, if greater than 20.							ee Paid (\$	Į	
Indep. Claims	Extra Claims		F	ee Paid (\$)	 			_	
	3 or HP =	x = =							
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
- 100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00									
SUBMITTED BY									
Signature				Registration No. (Attorney/Agent)	51,615	Telephone	Telephone (212) 308-4411		
Name (Print/Type)	Nicholas J. DiCeglie, Jr.					Date	Date October 14, 2008		

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4). Dated: October 14, 2008 Electronic Signature for Nicholas J. DiCeglie, Jr.: /Nicholas J. DiCeglie, Jr./